UTILITY PATENT APPLICATION					ATTORNEY DOCKET 80982BRLO				
TRANSMITTAL UNDER 37 CFR 1.53(b)					Customer No. 01333				
To: Commissioner for Patents					press Mail I	Label No.			
P.O. Box 1450									
Alexandria, VA. 22313-1450					2935111941			٠,	
METHOD OF HEDIC DE	EDOD		CDIALC	Da	· 7	1-2110	3		
METHOD OF USING PREDOPED MATERIALS FOR MAKING AN ORGANIC LIGHT-EMITTING					te:	<u> </u>			
DEVICE							•	PT0	
BEVICE							•	S.	
First Named Inventor (or	Applic	ation Ident	tifier):					∋ €	
`	* *		,					90	
Jianmin Shi								083	
Enclosed are:									
1. X Specification				(signment of the		0	
2 Shoot(a) of drawin	~(a)			,		stman Kodak C rtified copy of	-		
2. 3 Sheet(s) of drawin					=		-		
3. X Information Disclosure Statement Under 37 CFR 1.97.					8. X Preliminary Amendment				
4. Combined Declaration for	or Patent	Application	and Power o	f Atto	rney:				
4a. New									
4b. X Copy from a	a prior a _l	oplication (3	7 CFR 1.63(d	l) (for	continuation/c	livisional with	Box 11 com	pleted)	
5. X Incorporation by Reference (useable if Box 4b is 9. Deletion of Inventor(s).									
checked) The entire disclosure of the prior application, from Signed statement attached deleting inventor(s) named									
which a copy of the oath or declaration is supplied under Box 4b, in the prior application, see 37 CFR 1.63(d)(2) and									
is considered as being part of the				,	1.33(b).				
application and is hereby incor 10. If a 111A applicatio				o ido	atified applicat	tion amond the	enecificatio	n at Page 1	
				e-idei	ппеч аррпса	non, amenu me	specificatio	matrage i,	
after the title, by inserting the following:CROSS REFERENCE TO RELATED APPLICATION									
	is made	to and priori	ty claimed fro	m U.	S. Provisional	Application Se	rial No.,		
filed, entitled.	ATION	check appr	onriate hox ar	nd sur	nly the requisi	ite information:			
If a CONTINUING APPLICATION, check appropriate box and supply the requisite information: 11. Continuation X Divisional Continuation-in-part (CIP) of prior application No: 09/574,532.									
	•			_				· -	
12. X Please address all w Eastman Kodak Cor					•	gai Stair,			
Please Direct all tele			•	-					
The filing fee has been calcula	-	•							
FOR:		. FILED	NO. EXTR	ΑT	RATE	FEE			
BASIC FEE							\$ 750		
TOTAL CLAIMS	9	- 20 =	-0		x 18 =		\$ 0		
INDEPENDENT CLAIMS	1	-3 =	0		x 84 =	1	\$ 0		
MULTIPLE DEPENDEN	NT CLA	IM PRESEN	TED		+ 280 TOTAL		\$ 0 \$ 750		
					IOIAL		\$ 730		
X Please charge my Eastma	n Kodak	Company I	Deposit Accou	ınt No	o. <u>05-0225</u> in th	he amount of	\$ 750	·	
			py of this sh						
X The Commissioner is hereby authorized to charge any additional filing fees required under									
37 CFR 1.16 or credit any overpayment to Eastman Kodak Company Deposit Account No. <u>05-0225.</u> A duplicate c py of this speet is encl sed.									
	A	uupiicate c	py or this she	eet IS /	enci sed				
			4/2	u t		1	_		
Raymond L. Owens/das			Att	orne	y for Applic	ants			
Telephone: 585-477-465	3				ition No. 22				
Facsimile: 585-477-4646			•	_					